## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

TIMK 8302C1

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			18					RATE FI		) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		_	C FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/ 🖌 minus 20=		* 0		XS	 5 9=		OR	X\$18=	)
INDEPENDENT CLAIMS			ج minus 3 =		* O.			12=			X84=	2
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT							OR		
* If	the difference	less than 76	ss than zero, enter '		0" in column 2		40=		OR	+280=	0	
11						Julii 2	TOTAL			OR	TOTAL	250
	C	(Column 1)	MENDED - PART (Colum		nn 2)	(Column 3)	SM	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE	0.3	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	12=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		<u> </u>	40-			+280=	
								40= TOTAL		OR	TOTAL	
								r. FEE		OR	ADDIT. FEE	L
		(Column 1) CLAIMS		(Colur		(Column 3)	-		ADDI	ı .		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	12=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		+1	<del></del>		OR	+280=	
								OTAL			TOTAL	
								r. FEE		OR	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colur		(Column 3)				ı		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	3,000	=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X/	2=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		CLAIM					OR	X04=	
* If the certry in column 1 is less than the certry in column 2 write "0" in column 2										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE												
		her Previously Pa					r found in	the an	orooriate box	k in co	dumn 1	